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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09/149,5823	FILING DATE 02-01-02					
CLAIMS												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
101		1					51		1			
102		1					52		1			
103		1					53		1			
104		1					54		1			
105		3					55		1			
106		3					56		1			
107		3					57		1			
108		3					58		1			
109		3					59		1			
110		3					60		1			
111		3					61		1			
112		3					62		1			
113		3					63		1			
114		1					64		1			
115		1					65		1			
116		1					66		1			
117		3					67		1			
118		3					68		3			
119		3					69		3			
120		1					70		3			
121		2					71		3			
122		1					72		3			
123	1						73		3			
124	1						74		3			
125		1					75		3			
126		1					76		3			
127		1					77		1			
128		1					78		1			
129		1					79		1			
130		1					80		3			
131	1						81		3			
132		3					82	1	1			
133		3					83	1	1			
134		1					84	2	1			
135		1					85	1	1			
136		1					86	1				
137		1					87	1				
138		1					88	1				
139		1					89	1				
140		1					90	1				
141	3						91	1				
142	3						92	1				
143	3						93	1				
144	3						94	1				
145	1						95	2				
146	1						96	2				
147	1						97	1				
148	1						98	1				
149	1						99	1				
150	1						100	1				
TOTAL IND.	3						TOTAL IND.	3				
TOTAL DEP.	103						TOTAL DEP.	91				
TOTAL CLAIMS	106						TOTAL CLAIMS	94				

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103 MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO 09/495823	FILING DATE 02-01-00		
CLAIMS							APPLICANT(S)			
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51	1		
2		1					52	1		
3		1					53	1		
4		1					54	3		
5	1						55	3		
6		3					56	3		
7		3					57	1		
8		1					58	2		
9		1					59	0		
10		1					60	1		
11		1					61	1		
12		1					62	1		
13		1					63	1		
14		1					64	1		
15		3					65	1		
16		3					66	1		
17		3					67	1		
18		3					68	1		
19		1					69	3		
20		1					70	3		
21		1					71	1		
22		1					72	1		
23		1					73	1		
24		1					74	1		
25		1					75	1		
26		1					76	1		
27		1					77	1		
28		1					78	3		
29		1					79	3		
30		1					80	3		
31		1					81	3		
32		1					82	1		
33		1					83	1		
34		1					84	1		
35		1					85	1		
36		1					86	1		
37		1					87	1		
38		1					88	1		
39		1					89	1		
40		1					90	1		
41		1					91	1		
42		3					92	1		
43		3					93	1		
44		3					94	1		
45		3					95	1		
46		3					96	1		
47		3					97	1		
48		3					98	1		
49		3					99	1		
50		3					100	1		
TOTAL IND.	11	2	63				TOTAL IND.	3		
TOTAL DEP.	403						TOTAL DEP.	85		
TOTAL CLAIMS	414						TOTAL CLAIMS	88		

414

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09/149,823	FILING DATE 02-01-00						
							APPLICANT(S)							
							CLAIMS							
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	IND.	DEP.	IND.	DEP.	IND.	DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.								
201							51							
202							52							
203							53							
204	(1)						54							
205	(1)						55							
206	(1)						56							
207	(1)						57							
208							58							
209							59							
210							60							
211							61							
212							62							
213							63							
214							64							
215							65							
216							66							
217							67							
218							68							
219							69							
220							70							
221							71							
222							72							
223							73							
224							74							
225							75							
226							76							
227							77							
228							78							
229							79							
230							80							
231	(1)						81							
232	(1)						82							
233	(1)						83							
234	(1)						84							
235	(1)						85							
236							86							
237	(1)						87							
238	(1)						88							
239	(1)						89							
240	(1)						90							
241	(2)						91							
242	(1)						92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.							TOTAL IND.							
TOTAL DEP.							TOTAL DEP.							
TOTAL CLAIMS	(1)						TOTAL CLAIMS							